## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L05000018861

1. Entity Name

AAA MOBILE HOME MOVERS, LLC



FILED Feb 19, 2008 08:00 Al Secretary of State

Principal Place of Business

12944 ISLAND SPIRIT DRIVE PENSACOLA, FL 3256 Mailing Address

12944 ISLAND SPIRIT DRIVE PENSACOLA, FL 32506



CR2E083 (12/07)

Daytime Phone #

DO NOT WRITE IN THIS SPACE

01292008 No Chg-LLC

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

BUSH, MICHAEL 12944 ISLAND SPIRIT DRIVE PENSACOLA, FL 32506

the obligations of registered agent.

## DO NOT WRITE IN THIS SPACE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BUSH, MICHAEL 12944 ISLAND SPIRIT DRIVE PENSACOLA, FL 32506	V00000833965
TITLE NAME STREET AODRESS CITY-ST-ZIP		02/28/08-80033-019 143.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME		IN THIS SPACE
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept

(NOTE: Registered Agent signature required when reinstating)